

FEB 14 2006

IPLM Group, P.A.
 P.O. Box 18455
 Minneapolis, MN 55418
 612-331-7400 telephone
 612-331-7401 facsimile

PATENT

Attorney Docket No.	Serial No.
117P45USD1	10/777,409

FACSIMILE TRANSMITTAL LETTER

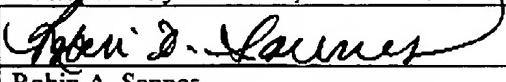
MS: Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

TOTAL NO. OF PAGES: 6
 Sent to Facsimile No.: 571-273-8300
 Examiner Phone No.: 571-272-4807

In re Application of:	Gregory G. Griesel et al.		
Serial No.:	10/777,409	Examiner:	William Charles Doerrler
Confirmation No.:	5789	Art Unit:	3744
Filed:	February 12, 2004		
For:	PRODUCT DISPENSER AND CARRIER		
We are transmitting the following documents:			
Facsimile Transmittal Letter [1 page] Fee Transmittal [1 page] Credit Card Payment Form [1 page] Supplemental Information Disclosure Statement [2 pages] Form 1449 [1 page]			

Please charge Deposit Account 50-0549 for any fees under 37 CFR §1.16 and §1.17 that may be required during the pendency of this application. This authorization includes the fee for any extension of time under 37 CFR §1.136(a) that may be necessary. To the extent any such extension should become necessary it is hereby requested.

Respectfully submitted,

Registration No. 45,070	Direct Dial 612-331-7419	
Date: February 14, 2006	Robin A. Sannes	
United States Patent and Trademark Office		
Customer No. 23322		

Certificate of Facsimile Transmission

Pursuant to 37 CFR 1.8, I certify that this correspondence is being sent to the telephone number shown below, addressed to: MS: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the below indicated date.

To Facsimile Number 571-273-8300	Signature 
Date February 14, 2006	Printed Name Robin A. Sannes

THIS FACSIMILE TRANSMISSION MAY CONTAIN CONFIDENTIAL OR LEGALLY PRIVILEGED INFORMATION INTENDED ONLY FOR THE DESTINATION IDENTIFIED ABOVE. If you are not the intended recipient, please do not read, use, disclose, distribute or copy this facsimile. Instead, please immediately notify the sender by telephone or fax, and retrieval of this facsimile will be arranged at no cost to you.	
---	--

FEB 14 2006

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2005** Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
180.00**Complete if Known**

Application Number	10777,409
Filing Date	February 12, 2004
First Named Inventor	Gregory G. Gries
Examiner Name	William Charles Doerrler
Art Unit	3744
Attorney Docket No.	117P45USD1

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: **50-0549** Deposit Account Name: IPLM Group, P.A.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity
Fee (\$)
Fee (\$)
Fee (\$)

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=				
HP = highest number of total claims paid for, if greater than 20						

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	
HP = highest number of independent claims paid for, if greater than 3			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement

180.00

SUBMITTED BY

Signature

*Robin A. Sannes*Registration No.
(Attorney/Agent) 45,070

Telephone 612-331-7419

Name (Print/Type)

Robin A. Sannes

Date February 14, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

FEB 14 2006

10/777,409

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Gregory G. Griese et al.	Examiner:	William Charles Doerrler
Serial No.:	10/777,409	Art Unit:	3744
Filed:	February 12, 2004	Confirmation No.:	5789
		Docket No.:	117P45USD1

For: **PRODUCT DISPENSER AND CARRIER****CERTIFICATE UNDER 37 CFR 1.8:**

I hereby certify that this correspondence is submitted via facsimile to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 (571-273-8300) on February 14, 2006.



Robin A. Sannes

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (37 C.F.R. §1.97(c))

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

With regard to the above-identified application, the items of information listed on the enclosed Form 1449 are brought to the attention of the Examiner.

This statement should be considered because it is submitted after the mailing date of a first Office Action on-the-merits, but before the mailing date of a final action under 37 C.F.R. § 1.113, and before the mailing date of the Notice of Allowance under 37 C.F.R. § 1.311. Please charge Deposit Account No. 50-0549 the amount of \$180.00 for consideration of the items listed on the enclosed Form 1449.

In accordance with 37 C.F.R. §1.98(a)(2)(i), a copy of each U.S. Patent and/or U.S. patent publication listed on the enclosed Form 1449 is not provided, as this application was filed after June 30, 2003. If any foreign patent document or "Other Document" is listed on the Form 1449, a copy of the document is enclosed, in accordance with 37 C.F.R. § 1.98(a)(2).

No representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§ 102 and 103 and Applicants reserve the right, pursuant to 37 C.F.R. § 1.131 or otherwise, to establish that the reference(s) are not "prior art." Moreover, Applicants do not represent that a

02/15/2006 MBINAS 00000020 10777489

01 FC:1806

180.00 0P

reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of M.P.E.P. 609, it is requested that the Examiner return a copy of the attached Form 1449, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

Please charge any additional fees or credit any overpayment to Deposit Account No. 50-0549.

Respectfully submitted,

GREGORY G. GRIESE ET AL.

Date: 02/14/2006

By: Robin A. Sannes
Robin A. Sannes
Reg. No. 45,070
IPLM Group, P.A.
Post Office Box 18455
Minneapolis, MN 55418
Telephone (612) 331-7419

RAS:db

FEB 14 2006

OMB No. 0651-0031

Page 1 of 1

Substitute for Form 1449/PTO

**INFORMATION
DISCLOSURE
STATEMENT BY APPLICANT**

Complete if Known	
Application Number	10/777,409
Filing Date	February 12, 2004
First Named Inventor	Gregory G. Gries
Art Unit	3744
Examiner Name	William Charles Doerrler
Attorney Docket No.	117P45USD1

U.S. PATENT DOCUMENTS

Examiner Initials	Cite No.	Document Number Number-Kind Code	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US-4,840,773	06-20-1989	Wade	
		US-			

FOREIGN PATENT DOCUMENTS

Examiner Initials	Cite No.	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T
		Country Code/Number/Kind Code				

NON PATENT LITERATURE DOCUMENTS

Examiner Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T

EXAMINER**Date Considered**

*Examiner: Initial if citation considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.